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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL**  
For FY 2008 Applicant claims small entity status. See 37CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 480.00)

## Complete if Known

Application Number	10/044,463
Filing Date	January 10, 2002
First Named Inventor	Davide R. Grassetti
Examiner Name	Shengjun Wang
Art Unit	1617
Attorney Docket No.	107-000110US

## METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): **Deposit Account**

Deposit Account Deposit Account Number: **50-0893** Deposit Account Name: Quine Intellectual Property Law Group, P.C.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

## FEE CALCULATION

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

## 2. EXCESS CLAIM FEES

<u>Fee Description</u>	<u>Small Entity</u>
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Each claim over 20 (including Reissues)	Fee (\$)	Fee (\$)
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Each independent claim over 3 (including Reissues)	50	25
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Multiple dependent claims	210	105
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Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
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- 20 or HP =	x	=		Fee (\$)	Fee Paid (\$)
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HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)		
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- 3 or HP =	x	=			
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HP = highest number of independent claims paid for, if greater than 3.

## 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
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- 100 =	/ 50 =	(round up to a whole number) x	=	
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## 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)

Other (e.g., late filing surcharge): \_\_\_\_\_

Other: Notice of Appeal 250

Other: Request for extension of time 230

Other: \_\_\_\_\_

Other: \_\_\_\_\_

Other: \_\_\_\_\_

## SUBMITTED BY

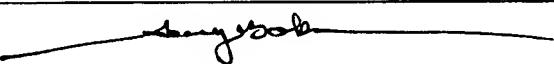
Signature		Registration No. (Attorney/Agent)	41,595	Telephone	510 762-3550
Name (Print/Type)	Gary Baker			Date	10/18/07

OCT 2 2007

# TRANSMITTAL FORM

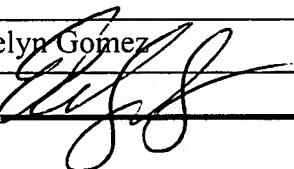
(to be used for all correspondence after initial filing)

	Application Number	10/044,463	
	Filing Date	January 10, 2002	
	First Named Inventor	Davide R. Grassetti	
	Group Art Unit	OCT 22 2007 1617	
	Examiner Name	Shengjun Wang	
Total Number of Pages in This Submission		Attorney Docket Number	107-000110US

ENCLOSURES (check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): <input type="checkbox"/> Pre-Appeal Brief Request for Review and receipt acknowledgment postcard	
<input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)			
<input checked="" type="checkbox"/> Extension of Time Request			
<input type="checkbox"/> Express Abandonment Request			
<input type="checkbox"/> Information Disclosure Statement			
<input type="checkbox"/> Certified Copy of Priority Document(s)			
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application			
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53			
<p><b>Authorization to Charge Deposit Account</b>            Please charge Deposit Account No. 50-0893 for any additional fees associated with this paper or during the pendency of this application, including any extensions of time for consideration of the documents enclosed.</p>			
<p>Remarks</p>			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual name	Gary Baker, Reg. No. 41,595, Quine Intellectual Property Law Group P.C.		
Signature			
Date	Oct 18, 2007		

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, DC 20231 on this date:

Typed or printed name	Evelyn Gomez		
Signature		Date	Oct. 18, 2007